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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number First Named Inventor		631020.90015	
				Martin G. Sirois	
		COMPLETE IF KNOWN			
		Application Number			
Declaration	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Filing Date	Augı	ust 31, 2001	
		Group Art Unit			
		Examiner Name			

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As a below named inventor, I her									
My residence, mailing address, and									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
LOCALIZED OLIGONUCLEOTIDE THERAPY FOR PREVENTING RESTENOSIS									
	(Title of t	he Invention)	······································						
the specification of which	(,							
is attached hereto									
OR CONTRACTOR OF THE PROPERTY									
was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if appli									
Application Number	and was a	and do on (minute)	,						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation- in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other									
then the United States of America, listed below and have also identified below by checking the box, any full-light application for									
patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop YES	oy Attached? NO				
n/a									
Additional foreign application	numbers are listed on a	supplemental priority da	ita sheet PTO/SB	1/02B attached her	reto:				

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
				A petition has been filed for this unsigned inventor			
Given Name Martin G. (first and middle [if any])				Family Name Sirois or Surname			
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NAME OF SECOND INVENTOR	.			A petit	ion has been fil	ed for this unsigned inventor	
· · · · · · · · · · · · · · · · · · ·			Family Name Edelman or Surname				
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City Brookline	State MA			ZIP 02	146	USA Country	
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

Please type a plus sign (+) inside this box	PTO/SB/02A (11-00)
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if ar	ıy:		A petition has been filed for this unsigned inventor				
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Given Name (first and middle [if any])			Family Name or Surname				
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Inventor's Signature	Date						
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Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])			Family Name or Surname				
Inventor's Signature	1				Date		
Residence: City	City State		Country		Citizenship		
Mailing Address							
Mailing Address							
City	State		ZIP	Col	untry		

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